	÷	10/633784												
	CLAIMS AS FILED - PART I								ITITY				·	
	TOTAL CLAI	MS	(C	olumn 1)	(Column :	Column 2)					OTHER THAN R SMALL ENTITY			
	FOR		NU	NUMBER FILED N				TE	FEE]	RAT	E	FEE	
	TOTAL CHAR	GEABLE CLAIM	1	 		NUMBER EXTRA		FEE	150.0		BASIC	FEE 30	0.00	
	INDEPENDENT CLAIMS			minus 20= * minus 3 = *			X\$ 2			OF	X\$50)=	Γ	
		PENDENT CLAIR	M PRESEN			-		0=		OF	X200)=		
ľ				Con the course of the course o			+18	0=		OF	+360	_		
l				ess than zero, enter "0" in column 2			TOT	AL ·		OR	TOTA	. //		
L		(Column 1	AMENI	MENDED - PART II (Column 2) (Column 3)				OTHER THAN SMALL ENTITY OR SMALL ENTITY						
[.	4	CLAIMS		HIGHEST			SMA			OR'	SMAL	L ENTI	TY	
AMENIDIACIA	5/25/			NUMBE PREVIOU PAID FO	ISLY EX	SENT · TRA	RAT	ET	ADDI- IONAL FEE		RATE	TIO	DI- NAL	
Š	Total Independent	1. 15	Minus	<u>" Z</u>) =		X\$ 25		<u></u>	OR	X\$50=	FE	T	
1	FIRST PRES	SENTATION OF	Minus MULTIPLE	DEPENDENT O	3 =		X100	-		OR	X200=		<i>†</i>	
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_	, , , , , , , , , , , , , , , , , , , 	(Column 1)		(Column	2) (Colur	no 3)	ADDIT. F	E		OR ,	DDIT. FE	Ē.	\dashv	
8	18/19/2	CLAIMS REMAINING		HIGHES NUMBER	T		Γ	A	DDI-	ŗ		7 405		
MEN	1 70	AFTER AMENDMENT		PREVIOUS PAID FOI	LY EXT		RATE	TIC	DNAL EE		RATE	ADD	AL	
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ပ		CLAIMS REMAINING		(Column 2	1					_				
ייאן		AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	Y PRESE		RATE	AD TIO			RATE	ADDI		
AMENDET :NI	Total	*	Minus	**	=		VA 05	FE	<u>E </u>			FEF		
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